

DECLARATION FOR "371" APPLICATION

COMBINED DECLARATION FOR UTILITY OR DESIGN PATENT APPLICATION WITH POWER OF ATTORNEY

- () Declaration submitted with initial filing or
 (X) Declaration submitted after initial filing (surcharge required 37CFR1.16(e))

ATTORNEY'S DOCKET PG3600USW
First Names Inventor: Farrow
<u>Complete if known:</u> App No.:
Filing Date
Group Art Unit:

As below named inventor. I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

MEMBER OF THE TNF LIGAND FAMILY

the specification of which (check only one item below):

[] is attached hereto.

OR

[X] was filed on _____ as United States application Serial No. 09/806,840 or PCT International

Application Number PCT/EP99/07303 filed October 5, 1999 and was amended on (MM/DD/YYYY)
 (if applicable)

I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR §1.56.

I hereby claim foreign priority benefits under 35, U.S.C. §119 (a)-(d) or §365(b) of any foreign applications(s) for patent or inventor's certificate or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate or of any PCT international application having a filing date before that of the application on which priority is claimed:

PRIOR FOREIGN AND ANY PRIORITY CLAIMS UNDER 35 U.S.C. 119:

Prior Foreign Application Number (s)	Country	Foreign Filing Date (MM/DD/YYYY))	PRIORITY CLAIMED
1. 9828628.9	GB	12/23/1998	x
2.			
3.			
4.			
5.			

I hereby claim the benefit under Title 35, United States Code §119(e) of any United States provisional application(s) listed below:

Application No.	Filing Date (MM/DD/YYYY)
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2	FULL NAME OF INVENTOR WINDER	FAMILY NAME WINDER	FIRST GIVEN NAME Alison	SECOND GIVEN NAME/INITIAL Janet
0	INVENTOR'S SIGNATURE <i>Alison J. Winder</i>	DATE: 31/7/01		
0	RESIDENCE & CITIZENSHIP CITY Stevenage	STATE OR FOREIGN COUNTRY Hertfordshire, GB	COUNTRY OF CITIZENSHIP GB	
4	POST OFFICE ADDRESS GlaxoSmithKline Five Moore Drive, PO Box 13398	CITY Research Triangle Park	STATE & ZIP CODE/COUNTRY NC 27709 US	
2	FULL NAME OF INVENTOR	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME/INITIAL
0	INVENTOR'S SIGNATURE	DATE:		
0	RESIDENCE & CITIZENSHIP CITY	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP	
5	POST OFFICE ADDRESS	CITY	STATE & ZIP CODE/COUNTRY	
2	FULL NAME OF INVENTOR	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME/INITIAL
0	INVENTOR'S SIGNATURE	DATE:		
0	RESIDENCE & CITIZENSHIP CITY	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP	
6	POST OFFICE ADDRESS	CITY	STATE & ZIP CODE/COUNTRY	
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DECLARATION FOR "371" APPLICATION

**COMBINED DECLARATION FOR UTILITY or DESIGN
PATENT APPLICATION WITH POWER OF ATTORNEY** ContinuedATTORNEY'S DOCKET NUMBER
PG3600USW

I hereby claim the benefit under 35, U.S.C. §120 of any United States application or §365(c) of any PCT international application designating the United States of America that is listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT International application in the manner provided by the first paragraph of 35 U.S.C. §112, I acknowledge the duty to disclose information which is material to patentability as defined in 37 C.F.R. §1.56 which became available between the filing date of the prior application(s) and the national or PCT international filing date of this application:

PRIOR U.S. PARENT APPLICATION or PCT PARENT APPLICATION

		STATUS (Check one)		
U.S. Parent Application or PCT Parent Number	Parent Filing Date (MM/DD/YYYY)	PATENTED	PENDING	ABANDONED

POWER OF ATTORNEY: As a named inventor, I hereby appoint the following attorney(s) and/or agent(s) to prosecute this application and transact all business in the U.S. Patent and Trademark Office connected therewith. (List name and registration number)

David J. Levy Charles E. Dadswell Karen L. Prus Robert H. Brink Elizabeth Selby	Reg. No. 27,655 Reg. No. 35,851 Reg. No. 39,337 Reg. No. 36,094 Reg. No. 38,298	James P. Riek Virginia C. Bennett Frank P. Grassler Christopher P. Rogers Lorie Ann Morgan	Reg. No. 39,009 Reg. No. 37,092 Reg. No. 31,164 Reg. No. 36,334 Reg. No. 38,181	Bonnie L. Deppenbrock John L. Lemanowicz Amy H. Fix	Reg. No. 28,209 Reg. No. 37,380 Reg. No. 42,616
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Send Correspondence to: David J. Levy, Patent Counsel Corporate Intellectual Property Department GlaxoSmithKline, Five Moore Drive, PO Box 13398 Research Triangle Park, NC 27709		Direct Telephone Calls to: Virginia C. Bennett 919-483-1012
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I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001, and that such willful false statements may jeopardize the validity of the application or any patent issuing thereon.

2	FULL NAME OF INVENTOR FARROW	FAMILY NAME <i>my Farrow</i>	FIRST GIVEN NAME Stuart	SECOND GIVEN NAME/INITIAL Neville
0	INVENTOR'S SIGNATURE			DATE: 31/7/2001
0	RESIDENCE & CITIZENSHIP	CITY Stevenage	STATE OR FOREIGN COUNTRY GB	COUNTRY OF CITIZENSHIP GB
1	POST OFFICE ADDRESS GlaxoSmithKline Five Moore Drive, PO Box 13398	CITY Research Triangle Park	STATE & ZIP CODE/COUNTRY NC 27709 US	
2	FULL NAME OF INVENTOR KAPTEIN	FAMILY NAME <i>my Kaptain</i>	FIRST GIVEN NAME Allard	SECOND GIVEN NAME/INITIAL
0	INVENTOR'S SIGNATURE			DATE:
0	RESIDENCE & CITIZENSHIP	CITY BH Oss	STATE OR FOREIGN COUNTRY Netherlands	COUNTRY OF CITIZENSHIP NL
2	POST OFFICE ADDRESS GlaxoSmithKline Five Moore Drive, PO Box 13398	CITY Research Triangle Park	STATE & ZIP CODE/COUNTRY NC 27709 US	
3	FULL NAME OF INVENTOR KITSON	FAMILY NAME <i>my Kitson</i>	FIRST GIVEN NAME Jeremy	SECOND GIVEN NAME/INITIAL David Alisdair
0	INVENTOR'S SIGNATURE			DATE: 31/07/2001
0	RESIDENCE & CITIZENSHIP	CITY Stevenage	STATE OR FOREIGN COUNTRY GB	COUNTRY OF CITIZENSHIP GB
3	POST OFFICE ADDRESS GlaxoSmithKline Five Moore Drive, PO Box 13398	CITY Research Triangle Park	STATE & ZIP CODE/COUNTRY NC 27709 US	

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PRIOR U.S. PARENT APPLICATION or PCT PARENT APPLICATION

		STATUS (Check one)		
U.S. Parent Application or PCT Parent Number		Parent Filing Date (MM/DD/YYYY)	PATENTED	PENDING
				ABANDONED

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David J. Levy	Reg. No. 27,655	James P. Riek	Reg. No. 39,009	Bonnie L. Deppenbrock	Reg. No. 28,209
Charles E. Dadswell	Reg. No. 35,851	Virginia C. Bennett	Reg. No. 37,092	John L. Lemanowicz	Reg. No. 37,380
Karen L. Prus	Reg. No. 39,337	Frank P. Grassler	Reg. No. 31,164	Amy H. Fix	Reg. No. 42,616
Robert H. Brink	Reg. No. 36,094	Christopher P. Rogers	Reg. No. 36,334		
Elizabeth Selby	Reg. No. 38,298	Lorie Ann Morgan	Reg. No. 38,181		

Send Correspondence to:

David J. Levy, Patent Counsel
Corporate Intellectual Property Department
GlaxoSmithKline,
Five Moore Drive, PO Box 13398
Research Triangle Park, NC 27709

Direct Telephone Calls to:

Virginia C. Bennett
919-483-1012

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1	POST OFFICE ADDRESS	STATE & ZIP CODE/COUNTRY NC 27709 US		
GlaxoSmithKline Five Moore Drive, PO Box 13398				
2	FULL NAME OF INVENTOR	FAMILY NAME KAPTEIN	FIRST GIVEN NAME Allard	SECOND GIVEN NAME/INITIAL
0	INVENTOR'S SIGNATURE	DATE: <i>August 2, 2001</i>		
0	RESIDENCE & CITIZENSHIP	CITY BH Oss	STATE OR FOREIGN COUNTRY Netherlands	COUNTRY OF CITIZENSHIP NL
2	POST OFFICE ADDRESS	STATE & ZIP CODE/COUNTRY NC 27709 US		
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